



CHITTARANJAN NATIONAL CANCER INSTITUTE  
37 S. P. Mukherjee Road, Kolkata—700 026.

No : HA—413 /15 /178

Date : 25 .09.2021

Director, Chittaranjan National Cancer Institute, Kolkata invites applications from eligible candidates in prescribed application format (copy enclosed) for a period of 44 days as full-time Medical Officer in *Pain and Palliative Care* on Contract basis.

Number of Positions: **1 (One)** Full time

Qualification & Experience:

(i) A recognised Medical Qualification included in the first or second schedule or part-II of the third schedule (other than licentiate qualification) to the Indian Medical Council Act, 1965. Holders of educational qualifications included in Part-II of the Third schedule should also fulfil the conditions stipulated in sub-section (3) of sections (13) of the Indian Medical Council Act, 1965.

(ii) 3 years experience in any clinical discipline in an Institute (preferably Cancer Hospital) with a certificate in Pain and/or Palliative care from a Govt. Recognised entity.

Remuneration: Rs. 95,000/- per month (Consolidated).

Age Limit: 55 years.

Duly completed applications along with bank draft of Rs 100/- drawn in favour of Director, CNCI, Kolkata and self attested copies of relevant documents should be submitted at the time of Walk-In Interview which will be held on **05.10.2021** at **12:30 P.M** in the office of the **O.I.C(H)** of CNCI, **Hazra Campus**.

No separate communication will be made in this regard.

Officer-In-Charge(H)  
**Dr. Rup Saha**  
Officer-In-Charge (H)  
C N C I, Kol-26

Copy to :

1. PS for information to Director
2. All Concerned
3. Notice Boards.



# CHITTARANJAN NATIONAL CANCER INSTITUTE

(An Autonomous Institute under Ministry of Health and Family Welfare, Govt. of India)

37, S. P. Mukherjee Road, Kolkata - 700 026

(Application form for the tenure positions of Junior Resident / Senior Resident / Medical Officer / Consultant Doctor)

1.	Name of the position applied for & the Advt. No.				
2.	Name of the Candidate (in BLOCK CAPITAL)				
3.	Father's / Husband's Name				
4.	Address for communication, in full with telephone number, email, etc.				
5.	Date of Birth *				
6.	Whether belonging to SC/ST/OBC *				
7.	Academic qualifications *				
Sl. No.	Degree / Diploma	Year	University / Institute	Division / Grade	Chance (for medical personnel only)
8.	MCI Registration No. (for medical personnel only) * Whether NET / GATE qualified (for research fellowship only) *				

\* Attach self authenticated certificates wherever required.

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9.	List of publications, if any (kindly attach additional sheet, if required)	
10.	Experience, if any (kindly attach additional sheet, if required)	
11.	Present status (kindly attach additional sheet, if required)	

I hereby declare that the information given above is true and complete to the best of my knowledge and belief.

Dated :

(Signature of the Candidate)

List of enclosures :

- 1.
- 2.
- 3.
- 4.
- 5.
- 6.
- 7.
- 8.